



12-5-05

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# AMENDMENT TRANSMITTAL LETTER

Docket No.  
03269/100M292-US3

Application No.  
10/725,246-Conf. #1944

Filing Date  
December 1, 2003

Examiner  
S. Wang

Art Unit  
1617

Applicant(s): Kenneth Newman et al.

Invention: METHOD OF TREATING ACUTE PAIN WITH IBUPROFEN AND OXYCODONE

## TO THE COMMISSIONER FOR PATENTS

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	18	- 21 =		x	
Independent Claims	6	- 6 =		x	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify):					
Extension for response within first month					120.00
Terminal Disclaimer over U.S. Serial No. 10/925,783					130.00
Terminal Disclaimer over U.S. Serial No. 10/861,239					130.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					380.00

☒ Large Entity

☐ Small Entity

☐ No additional fee is required for this amendment.

☐ Please charge Deposit Account No. \_\_\_\_\_ in the amount of \$ \_\_\_\_\_.  
A duplicate copy of this sheet is enclosed.

☒ A check in the amount of \$ 380.00 to cover the filing fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☒ The Director is hereby authorized to charge and credit Deposit Account No. 04-0100  
as described below.

☒ Credit any overpayment.

☒ Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.

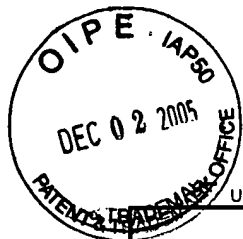
Jay P. Lessler  
Attorney Reg. No.: 41,151

Dated: December 2, 2005

DARBY & DARBY P.C.  
P.O. Box 5257  
New York, New York 10150-5257  
(212) 527-7700

Express Mail Label No.

Dated: \_\_\_\_\_



Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

<b>Effective on 12/08/2004.</b> <b>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</b>		<b>Complete if Known</b>	
<b>FEE TRANSMITTAL</b> <b>For FY 2005</b>		Application Number	10/725,246-Conf. #1944
		Filing Date	December 1, 2003
		First Named Inventor	Kenneth Newman
		Examiner Name	S. Wang
		Art Unit	1617
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27	Attorney Docket No.	03269/100M292-US3	
<b>TOTAL AMOUNT OF PAYMENT</b>	<b>(\$)</b> 380.00		

<b>METHOD OF PAYMENT</b> (check all that apply)	
<input checked="" type="checkbox"/> Check	<input type="checkbox"/> Credit Card
<input type="checkbox"/> Money Order	<input type="checkbox"/> None
<input type="checkbox"/> Other (please identify): _____	
<input type="checkbox"/> Deposit Account	Deposit Account Number: <b>04-0100</b> Deposit Account Name: <b>Darby &amp; Darby P.C.</b>
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

<b>FEE CALCULATION</b>							
<b>1. BASIC FILING, SEARCH, AND EXAMINATION FEES</b>							
	<b>FILING FEES</b>		<b>SEARCH FEES</b>		<b>EXAMINATION FEES</b>		
		<b>Small Entity</b>		<b>Small Entity</b>		<b>Small Entity</b>	
<b>Application Type</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fee (\$)</b>	<b>Fees Paid (\$)</b>
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
<b>2. EXCESS CLAIM FEES</b>							
						<b>Small Entity</b>	
						<b>Fee (\$)</b>	<b>Fee (\$)</b>
<b>Fee Description</b>							
Each claim over 20 (including Reissues)						50	25
Each independent claim over 3 (including Reissues)						200	100
Multiple dependent claims						360	180
<b>Total Claims</b>		<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>	<b>Multiple Dependent Claims</b>		
18		- 21 =	x	=	<b>Fee (\$)</b>		<b>Fee Paid (\$)</b>
<b>Indep. Claims</b>		<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>			
6		- 6 =	x	=			
<b>3. APPLICATION SIZE FEE</b>							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
<b>Total Sheets</b>	<b>Extra Sheets</b>	<b>Number of each additional 50 or fraction thereof</b>		<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>		
	- 100 =	/50	(round up to a whole number) x	=			
<b>4. OTHER FEE(S)</b>							
						<b>Fees Paid (\$)</b>	
Non-English Specification, \$130 fee (no small entity discount)						120.00	
Other (e.g., late filing surcharge):						130.00	
1814 Statutory Disclaimer						130.00	
1814 Statutory Disclaimer						130.00	

<b>SUBMITTED BY</b>			
Signature		Registration No. (Attorney/Agent)	41,151
Name (Print/Type)	Jay P. Lessler	Telephone	(212) 527-7700
		Date	December 2, 2005

Express Mail Label No.	Dated: _____
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Application No. (if known): 10/725,246

Attorney Docket No.: 03269/100M292-US3

## Certificate of Express Mailing Under 37 CFR 1.10

I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail, Airbill No. \_\_\_\_\_ in an envelope addressed to:

**EV692135056-US**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

on December 2, 2005  
Date

Signature

Typed or printed name of person signing Certificate

Registration Number, if applicable

Telephone Number

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

<sup>14</sup>  
Amendment (~~13~~ pp.)  
Amendment Transmittal (1 p.)  
Fee Transmittal (1 p.)  
Petition for 1-Month Extension of Time (1 p.)  
Terminal Disclaimer over U.S. Serial No. 10/861,239 (1 p.)  
Terminal Disclaimer over U.S. Serial No. 10/925,783 (1 p.)  
Statement under 37 CFR 3.73(b) (1 p.)  
Check no. 10483 in the amount of \$380.00  
Return Receipt Postcard